2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2009
Secretary of State

DOCUMENT# L06000013659

Entity Name: FLIGHT-1, LLC

Current Principal Place of Business:

913 SHAYLER AVE.
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

913 SHAYLER AVE.
DELAND, FL 32724

New Mailing Address:

FEI Number: 65-1268444 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PILCHER, SHANNON
913 SHAYLER AVE.
DELAND, FL 32724 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	TAGLE, JONATHAN A	
Address:	41410 JUNIPER #321	
City-St-Zip:	MURRIETA, CA 92562	
Title:	MGRM	( ) Delete
Name:	PILCHER, SHANNON	
Address:	913 SHAYLER AVE.	
City-St-Zip:	DELAND, FL 32724	
Title:	MGRM	( ) Delete
Name:	BOBO, IAN	
Address:	2350 W. PARK RD	
City-St-Zip:	DELAND, FL 32724	
Title:	MGRM	( ) Delete
Name:	COLCLASURE, JOHN CHARLES	
Address:	32013 COTTAGE GLENN DRIVE	
City-St-Zip:	LAKE ELSINORE, CA 92532	
Title:	MGRM	( ) Delete
Name:	MOLEDZKI, JASON	
Address:	830 E. INDIANA AVENUE	
City-St-Zip:	DELAND, FL 32724	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHANNON T. PILCHER MGRM 02/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date